



PATENT  
Docket No.: 2283/301

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Leivan DeVeylder et al

Serial No. : 09/574,735

Conf. No. : 1507

Filed : May 18, 2000

For : CYCLIN-DEPENDENT KINASE INHIBITORS  
AND USES THEREOF

Examiner:  
C. Collins

Art Unit:  
1638

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TECH CENTER 1600/2900

Assistant Commissioner for Patents  
Washington, D.C. 20231

STATEMENT UNDER 37 C.F.R. § 1.825(a) AND (b)

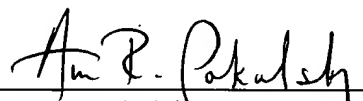
Sir:

The undersigned states that the substitute paper and computer readable form (CRF) of the Sequence Listing submitted herewith, are fully supported by the application as filed and include no new matter.

Further, the undersigned states that the information recorded in the CRF, submitted herewith, is identical to the paper copy of the Sequence Listing, also submitted herewith.

Respectfully submitted,

Dated: July 25, 2001

  
Ann R. Pokalsky  
Registration No. 34,697

Nixon Peabody LLP  
990 Stewart Avenue  
Garden City, New York 11530-4838  
Telephone: (516) 832-7572  
Facsimile: (516) 832-7555

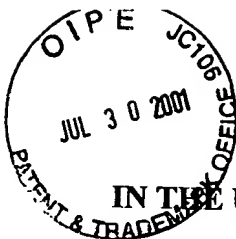
ARP/mm

G196870.1

**CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)**

I certify that the attached correspondence is being deposited on 7/25/01 with the U.S. Postal Service as first class mail under 37 C.F.R. § 1.8 and addressed to:  
Assistant Commissioner for Patents, Washington, D.C. 20231.

  
Maria L. Matos



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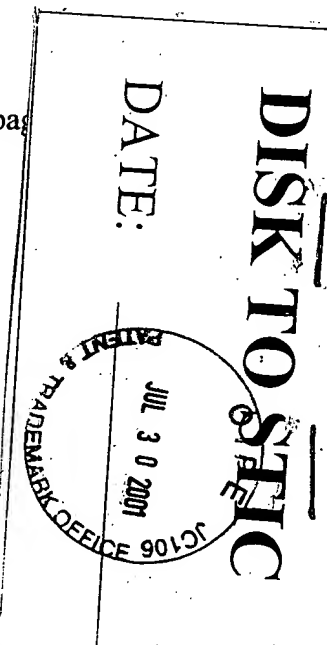
TECH CENTER 1600/2900

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is an Supplemental Preliminary Amendment (10 pages) above-identified application. Also enclosed are:

- ☒ A self-addressed, prepaid postcard for acknowledging receipt.
- ☒ Statement Under 37 C.F.R. § 1.825(a) and (b)
- ☒ Sequence Listing (14 pages)
- ☒ Computer Readable Form of the Sequence Listing Diskette
- ☒ Substitute Drawing (1 page)
- ☒ No additional fee is required.
- ☒ The fee has been calculated as shown below:



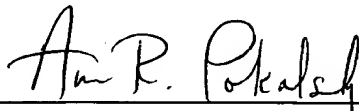
BEST AVAILABLE COPY

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	a) SMALL b) LARGE ENTITY RATE	ADD'L FEE
TOTAL	149	MINUS	149	+ 0	a) \$ 9= b) \$18	\$0
INDEP	26	MINUS	26	+ 0	a) \$40= b) \$80	\$0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					See fee Schedule	\$0
<input type="checkbox"/> Extension of Time Fee (___ Months)						

[X] The Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 14-1138.

**A duplicate copy of this sheet is enclosed.**

Date: July 25, 2001

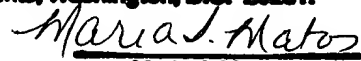
  
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